Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			15				ſ	RATE	FEE	1	RATE	FEE
FC	R		NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	370.00	OR	BASIC FEE	740.00
тс	TAL CHARGEA	BLE CLAIMS	15 minus 20=		* 0			X\$ 9=		OR	X\$18=	
	EPENDENT CL		L	nus 3 =	* 0			X42=		OR	X84=	· ·
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				Ī	+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, ente	r "0" in c	column 2	L	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II									<del></del>	1	OTHER	
_	The same of all the same of th	(Column 1)	(Column			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=	X\$ 9=		OR	X\$18=	
AM	Independent	*	Minus	***				X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		Ī	+140=		OR	+280=	
										OR	TOTAL ADDIT, FEE	
		ĺ	DDIT. FEE		•	ADDII. I EE						
AMENDMENT B	1. 456	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CL AIM	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  BEST AVAILABLE COPY								+140=		OR	+280=	
							A	TOTAL DDIT. FEE		OR	TOTÄL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	×.	=·		X42=			X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM			776=		OR	∧04=	
*	If the entry in colu	mn 1 is less than t	he entry in only	imn 2 samte	a "O" ia aa	dumo 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE	
		mber Previously P nber Previously Pa					r four	nd in the app	ropriate bo			